Docket No.

MEI Form -1.2, (July 1, 2005)

		R OF ATTORNEY	FOR U.S. PATENT A	
next to my name; and I belie	eve that I am the origin	al, first and sole inve	entor (if only one name is lis	itizenship are as stated below ted below) or an original, first or which a patent is sought on
Title: TRANSMITTING MET TRANSCEIVING DEVICE	HOD, RECEIVING ME	THOD, TRANSMITT	ING DEVICE, RECEIVING [	DEVICE AND
the specification in Int	tion, or Application No filed on	No. PCT/ JP2005/0	filed on (if applica	
I hereby state that I as amended by any amended	have reviewed and und nent(s) referred to abov	derstand the contents e.	of the above-identified spec	cification, including the claims,
l acknowledge my o patentability as defined in Tit	duty to disclose to the Utle 37, Code of Federal	J.S. Patent and Trad Regulations, §1.56.	emark Office all information	known to me to be material to
application(s) for patent or i country other than the Unite	inventor's certificate, or d States of America, lis	r §365(a) of any PC sted below, and have	T international application value also identified below any fo	172, or §365(b) of any foreign which designated at least one oreign application for patent or application on which priority is
COUNTRY	APPLICA	ATION NO.	DATE OF FILING	PRIORITY CLAIMED
ЈР	2004-:	255289	September 2, 2004	Yes
				1
Alba				
□ Additional foreign or intern  I hereby claim the listed below.				attached hereto. ates Provisional application(s)
Num	ber		(Day/Month/Year F	iled)

□ Additional U.S. provisional application numbers are listed on a supplemental priority sheet attached hereto.

## Docket No.

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(C) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

APPLICATION NO.	U.S. FILING DATE	STATUS: PATENTED, PENDING, ABANDONED

□ Additional U.S. or international application numbers are listed on a supplemental priority sheet attached hereto.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorneys and agents associated with U.S. Patent and Trademark Office Customer Number identified bellow to prosecute this application and to transact all business in the U.S. Patent and Trademark Office connected therewith, and direct that all correspondence be addressed to that customer number.

I hereby authorize the U.S. attorneys and agents associated with the customer number to accept and follow instructions from Matsushita Electric Industrial Co., Ltd., and any affiliated or subsidiary company thereof, received via their corporate representatives and/or their foreign patent attorneys or agents, if any, as to any action to be taken in the U.S. Patent and Trademark Office regarding this application without direct communication between the U.S. attorneys or agents and myself.

Direct Correspondence to:

## CUSTOMER NUMBER

52349

I further declare that all statements made herein of my own knowledge are true, and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full Name of Sole or First Inventor	FIRST NAME Naotake	LAST NAME YAMAMOTO	SIGNATURE N. Jamamoto		SIGNATURE
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Post Office Address	ADDRESS	спу	STATE OR COUNTRY	ZIP CODE

## Docket No.

Full Name of	FIRST NAME	LACTNAME	CIONATURE	DATE OF	CIONATURE
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Post Office Address	ADDRESS	спү	STATE OR COUNTRY ZIP COD		ZIP CODE
Full Name of	FIRST NAME	LAST NAME	SIGNATURE	DATE O	SIGNATURE
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Residence & Citizenship	CITY	STATE OR COUNTRY		COUNTRY OF	CITIZENSHIP
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Post Office Address	ADDRESS	СПҮ	STATE	OR COUNTRY	ZIP CODE
(If there are more tha	n seven inventors, pleas	se add a copy of this page for ide	entification and sign	nature for the additi	onal
inventors)					
ne above application may be n	nore particularly identifie	ed as follows:			
S. Application No		Filing Date			
oplicant Reference Number <u>F</u>	2038978-01 Attorne	y Docket No			